LOBBYIST ANNUAL REPORT FORM



Phone: (208) 334-2852 Fax: (208) 334-2282

Rev. 06/2006	LOBBYI	ST ANNUA	L RE	PORT FORM	DA	179	Page(s)
State of Idano		/ /.	BBYISTS . 67-661		TU		FEET PRICE USE ONLY
(Type or print clea See instructions at	urly in black ink) bottom of page	Annual SOA		Semi-Annu	ıal		OASIATE
Roger Batt 55 SW 5th Ave #100 Meridian ID 83642	ss address		Date	e prepared 01/29/0	08	_	year ending (Day) (Yr.)
Item 1 Totals of all reportab	le expenditures made or	r incurred by Lob	byist or	by Lobbyist's Empl	loyer on behalf o	of Lobb	yist's Employer.
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity	*Total Amount for	Proportionate amo		ntributed by each emp	loyer (Identify er	mployer	s, under
Do Not Have to be Reported	All Employers	Employer No.	1	Employer No. 2	Employer No. 3		Employer No. 4
Entertainment Food and Refreshment	\$	\$		\$	\$		\$
Living Accommodations							14/19/17
Advertising	250.00	205		205.00			175 00 10 20
Travel	850.00	225.		225.00		5.00	175.00.125.00
Telephone	<u>500.00</u> 75.00	125.	00	100.00		5.00 5.00	100.00
Other Expenses or Services	73.00		-			5.00	
. Total	s1,425.00	s350.	00 8	325.00	s47	5.00	375.0 <u>925.00</u>
*When the number of employers you							
ttem The totals of each expending Date	Place		legislato mount				ve officials.
Continued on attached page(s)							
	RUCTIONS	***	ltem	Em	nployer(s) Name(s) and Ad	ldress(es)
Who should file this form: An 67-6617 Idaho Code	Market .	der Section	No. 1	Idaho Eastern 55 SW 5th Ave	-		
Filing deadline: Annual report Executive Lol	is due on January 31st.		No. 2	Idaho Mint Gro			33642
Secre	en Ysursa tary of State		No. 3	Idaho Ground \ 55 SW 5th Ave			33642
	Box 83720 D 83720-0080		No. 4	Idaho Grape G	rowers & Win	e Prod	ducers

Commission 55 SW 5th Ave #100 Meridian ID

	Da	ate	Amount	Nan	olic or Executive Official or for or on behalf of any Legislator, Public or Executive Official. Name of Legislator, Public or Executive Official Receiving or Benefiting						
Item 5	Subjec or Hou the Lo	et matter use Bill, bbyist w	of proposed legislat Resolution or other as supporting or op	ion, the number of the Senate legislative activity in which oposing.	LEGISLATIVE SUB	JECT Code	IDENTIFICATION Subject				
ubject from t	Code		solution or Other ive Ident. Number	Appropriation Bill Number and Section Number	01 Agriculture, horticulture, farming, and livestock	17	Health service, medicine, drugs and controlled substances, health				
				and Section Number	02 Amusements, games, athletics		insurance, hospitals				
01	1		43, S1115,		and sports 03 Banking, finance, credit and	18 19	Higher education Housing, construction, codes				
		S11	16, S1117		investments	20	Insurance (excluding health				
					04 Children, minors, youth, senior citizens	21	insurance) Labor, salaries and wages,				
					05 Church and religion		collective bargaining				
23	3		H252		06 Consumer affairs 07 Ecology, environment, pollution,	22	Law enforcement, courts, judges, crimes, prisons				
			11202		conservation, zoning, land and	23	License, permits				
					water use 08 Education	24 25	Liquor Manufacturing, distribution and				
					09 Elections, campaigns, voting,		services				
					political parties 10 Equal rights, civil rights,	26	Natural resources, forest and forest products, fisheries, mining				
					minority affairs		and mining products				
					11 Government, financing, taxation, revenue, budget,	27 28	Public lands, parks, recreation Social insurance, unemployment				
			17		appropriations, bids, fees, funds		insurance, public assistance,				
					12 Government, county 13 Government, federal	29	workmen's compensation Transportation, highways,				
					14 Government, municipal		streets and roads				
					15 Government, special districts 16 Government, state	30	Utilities, communications, televisions, radio, newspaper,				
					To Government, state		power, CATV, gas				
			į			31	Other (please specify)				
tem 6	contr	ract bid o		ecision, procurement, ncial services agreement or opposing.	CERTIFICATION: 1 hereby certify the correct statement in accordance with S Long of Signature Employer No. 1 signature Employer No. 2 signature		Date 01-27-08 Date 1/26-08 Date				
					Employer No. 3 signature		01-28-8 Date \$1-28-08				
					Employer No. 3 signature	productive to the	Date				
							61-70-68				

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